Case 20-11200-elf Doc 12 Filed 03/12/20 Entered 03/12/20 11:09:48 Desc Main Document Page 1 of 19

					Doc	ument	Page 1 of 19	9				
Filli	in this info	ormation to i	dentify y	our case and th	is filing	j:						
Deb	tor 1	Kimbo	rly E D	awald								
DOD	101 1	First Name		Middle	Name		Last Name					
Deb	tor 2											
(Spot	use, if filing)	First Name	е	Middle	Name		Last Name					
Unit	ed States E	Bankruptcy C	ourt for tl	ne: EASTERN	DISTRI	CT OF PENN	ISYLVANIA					
		, ,										
Cas	e number	20-11200					_					Check if this is an
												amended filing
∩ff	icial F	orm 106	SA/B									
<u>50</u>	neau	ile A/B	: Pr	operty								12/15
n ead	ch category	, separately lis	st and des	scribe items. List a	n asset	only once. If	an asset fits in more the	han one	category, lis	st the asset in	the o	category where you
							e are filing together, b ne top of any additiona					
Answ	er every qu	estion.		·					-			,
Part	1: Describ	e Each Resid	ence. Bui	lding, Land, or Otl	ner Real	Estate You O	wn or Have an Interest	ln .				
				· · · · · · · · · · · · · · · · · · ·								
1. D c	you own o	r have any leg	al or equ	itable interest in a	ny resid	ence, building	, land, or similar prope	erty?				
П	No. Go to P	Part 2										
_			_									
-	Yes. Where	e is the propert	y?									
1.1					What	is the propert	y? Check all that apply					
	3400 Les	ster Road				Single-family	home		Do not ded	uct secured cl	aims ·	or exemptions. Put
	Street addres	ss, if available, or	other descr	iption	_	Duplex or mu	Iti-unit building		the amount	t of any secure	ed clai	ms on <i>Schedule D:</i>
						Condominium	or cooperative		Creattors V	vno Have Ciai	ms Se	ecured by Property.
					Ц							
						Manufactured	d or mobile home		Current va	lue of the	Cu	rrent value of the
	Philadel	phia	PA	19154-0000		Land			entire prop			rtion you own?
	City		State	ZIP Code		Investment p	roperty		\$23	30,000.00		\$230,000.00
						Timeshare			Describe t	he nature of v	our c	wnership interest
						Other			(such as fo	ee simple, ten		by the entireties, or
					_		t in the property? Chec	ck one		e), if known.		
						Debtor 1 only			Joint ter	nant		
	Philadel	phia				Debtor 2 only						
	County					Debtor 1 and	Debtor 2 only		□ Check	c if this is con	nmun	ity property
						At least one of	of the debtors and anoth	ier	(see in:	structions)		
						-	ou wish to add about	this item	, such as lo	cal		
					prope	erty identificat	ion number:					
							from Part 1, includi					\$230,000.00
	pages you	i ilave attacii	eu ioi r	ait i. Wiite tiiat	Hullibe	1 11616						
_												
Part	2: Describ	e Your Vehicl	es									
Do v	ou own le	ass or have	ادموا د	equitable inter	et in a	ny vehicles	whether they are re	aistoro	l or not? li	nclude any v	ohicl	es you own that
							xecutory Contracts a				CHICK	es you own that
		•					,					
3. C a	ars, vans,	trucks, tract	ors, spo	rt utility vehicle	s, moto	rcycles						
	No											
Ц	Yes											

Official Form 106A/B Schedule A/B: Property page 1

Filed 03/12/20 Case 20-11200-elf Doc 12 Entered 03/12/20 11:09:48 Desc Main Page 2 of 19 Document Debtor 1 Case number (if known) 20-11200 Kimberly E Dewald 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ■ No ☐ Yes 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for \$0.00 pages you have attached for Part 2. Write that number here..... Part 3: Describe Your Personal and Household Items Do you own or have any legal or equitable interest in any of the following items? Current value of the portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware □ No Yes. Describe..... \$6,400.00 Various articles of household goods, furnishings and electronics 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games ■ No ☐ Yes. Describe..... 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ■ No ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments No ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment No ☐ Yes. Describe..... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories ☐ No Yes. Describe..... \$1,000.00 Clothing

12. **Jewelry**

Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver

☐ No

Yes. Describe.....

Wedding rings \$2,000.00

Case 20-11200-elf Doc 12 Filed 03/12/20 Entered 03/12/20 11:09:48 Desc Main Page 3 of 19 Document Debtor 1 Case number (if known) 20-11200 Kimberly E Dewald 13. Non-farm animals Examples: Dogs, cats, birds, horses No ☐ Yes. Describe..... 14. Any other personal and household items you did not already list, including any health aids you did not list ■ No ☐ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$9,400.00 for Part 3. Write that number here Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition ☐ Yes..... Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. □ No Institution name: ■ Yes..... Wells Fargo (Includes Tax refund) \$3,232.81 Checking Wells Fargo \$108.00 Savings 17.2. 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ■ No Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. $\hfill \square$ Yes. Give specific information about them Issuer name:

21. Retirement or pension accounts

Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans

■ No

☐ Yes. List each account separately.

Type of account:

Institution name:

Case 20-11200-elf Doc 12 Filed 03/12/20 Entered 03/12/20 11:09:48 Desc Main Page 4 of 19 Document Debtor 1 Case number (if known) 20-11200 Kimberly E Dewald 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others ■ No ☐ Yes. Institution name or individual: 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) No Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements No ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ☐ Yes. Give specific information about them... Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information..... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No ☐ Yes. Give specific information.. 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance No

32. Any interest in property that is due you from someone who has died

Yes. Name the insurance company of each policy and list its value.

Company name:

If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died.

Beneficiary:

■ No

☐ Yes. Give specific information..

Surrender or refund

value:

Debt	tor 1	Kimberly E Dewald			Case number (if known)	20-11200
	Examp	against third parties, whether les: Accidents, employment dis			and for payment	
	No I Vas	Describe each claim				
	l No	contingent and unliquidated c	aims of every nature, inclu	ding counterclaims	of the debtor and rights to	set off claims
	Yes.	Describe each claim				
			Bodily Injury claim bei Esquire	ng handled by Mui	rray Greenfield,	Unknown
35. A	Any fin	ancial assets you did not alre	ady list			
	No					
	l Yes.	Give specific information				
36.		he dollar value of all of your e irt 4. Write that number here	•	• •		\$3,340.81
Part	5: Des	scribe Any Business-Related Prop	erty You Own or Have an Inter	est In. List any real esta	ate in Part 1.	
37. D	o you c	own or have any legal or equitable	interest in any business-relate	ed property?		
		to Part 6.	•	,		
	Yes. G	io to line 38.				
Part		scribe Any Farm- and Commercial ou own or have an interest in farmlar		Own or Have an Interes	st In.	
46. C	o you	own or have any legal or equ	itable interest in any farm-	or commercial fishir	ng-related property?	
	No.	Go to Part 7.	·			
	☐ Yes.	Go to line 47.				
Part	7:	Describe All Property You Own	or Have an Interest in That You	Did Not List Above		
		have other property of any ki bles: Season tickets, country clul		?		
	No					
	l Yes.	Give specific information				
54.	Add t	he dollar value of all of your e	ntries from Part 7. Write th	at number here		\$0.00
Part	8:	List the Totals of Each Part of thi	s Form			
55.	Part 1	: Total real estate, line 2				\$230,000.00
56.	Part 2	: Total vehicles, line 5		\$0.00		
57.	Part 3	: Total personal and househo	ld items, line 15	\$9,400.00		
58.		: Total financial assets, line 3		\$3,340.81		
59.		: Total business-related prop	-	\$0.00		
60.		: Total farm- and fishing-relat		\$0.00		
61.	Part 7	: Total other property not list	ed, line 54 +	\$0.00		
62.	Total	personal property. Add lines 5	6 through 61	\$12,740.81	Copy personal property t	otal \$12,740.81
63.	Total	of all property on Schedule A	B . Add line 55 + line 62			\$242,740.81

Official Form 106A/B Schedule A/B: Property page 5

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Fill in this infor	mation to identify your	case:		
Debtor 1	Kimberly E Dewa	ld		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		EASTERN DISTRICT C	F PENNSYLVANIA	
Case number	20-11200			
(if known)				☐ Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

	☐ You are claiming state and federal nonban	kruptcy exemptions.	11 U.S	S.C. § 522(b)(3)		
	■ You are claiming federal exemptions. 11 l	J.S.C. § 522(b)(2)				
2.	For any property you list on Schedule A/B	that you claim as exe	empt,	fill in the information below.		
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption	
		Copy the value from Che Schedule A/B		eck only one box for each exemption.		
	3400 Lester Road Philadelphia, PA	\$230,000.00		\$0.00	11 U.S.C. § 522(d)(1)	
	19154 Philadelphia County Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit		
	Various articles of household goods,	\$6,400.00		\$6,400.00	11 U.S.C. § 522(d)(3)	
	furnishings and electronics Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit		
	Clothing Line from Schedule A/B: 11.1	\$1,000.00		\$1,000.00	11 U.S.C. § 522(d)(3)	
	Line from Schedule A/B: 11.1			100% of fair market value, up to any applicable statutory limit		
	Wedding rings Line from Schedule A/B: 12.1	\$2,000.00		\$1,700.00	11 U.S.C. § 522(d)(4)	
	Line Irom Schedule A/B. 12.1			100% of fair market value, up to any applicable statutory limit		
	Wedding rings	\$2,000.00		\$300.00	11 U.S.C. § 522(d)(5)	
	Line from Schedule A/B: 12.1			100% of fair market value, up to		

any applicable statutory limit

Debtor 1	ebtor 1 Kimberly E Dewald		Case number (if known)	20-11200					
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the Amount of the exe portion you own		ount of the exemption you claim	Specific laws that allow exemption				
		Copy the value from Check only one box for each exemption. Schedule A/B							
	Checking: Wells Fargo (Includes Tax refund)	\$3,232.81		\$3,232.81	11 U.S.C. § 522(d)(5)				
	Line from Schedule A/B: 17.1			100% of fair market value, up to any applicable statutory limit					
	Savings: Wells Fargo Line from Schedule A/B: 17.2	\$108.00		\$108.00	11 U.S.C. § 522(d)(5)				
	Elle Holli egiledale 74B. TTIE			100% of fair market value, up to any applicable statutory limit					
	Bodily Injury claim being handled by Murray Greenfield, Esquire	Unknown		\$0.00	11 U.S.C. § 522(d)(11)(D)				
	Line from Schedule A/B: 34.1			100% of fair market value, up to any applicable statutory limit					
3.	Are you claiming a homestead exemption of more than \$170,350? (Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment.)								
	■ No				_				
	Yes. Did you acquire the property covere	ed by the exemption wi	ithin 1	,215 days before you filed this case	?				
	□ No								
	☐ Yes								

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		Document F	Page 8 c	of 19		
Fill	in this information to identify you	ır case:				
Deb	otor 1 Kimberly E Dew	vald				
	First Name		ast Name			
	otor 2 use if, filing) First Name	Middle Name La	ast Name			
Lini	ted States Bankruptcy Court for the	: EASTERN DISTRICT OF PENNS	YI VANIA			
Oili	ted States Bankruptey Court for the	EXOTERIOR DISTRICT OF FERNANCE	1277114171			
	20-11200					
(if kn	nown)				_	if this is an
					amend	led filing
Off	icial Form 106D					
		Who Have Claims Se	cured	by Propert	v	12/15
		If two married people are filing together, to out, number the entries, and attach it to the				
	ber (if known).	,			p ,	
1. Do	any creditors have claims secured by	y your property?				
	$\hfill\square$ No. Check this box and submit t	his form to the court with your other sch	nedules. You	u have nothing else t	o report on this form.	
	■ Yes. Fill in all of the information	below.				
Par	t 1: List All Secured Claims					
		more than one secured claim, list the creditor	r senarately	Column A	Column B	Column C
for e	each claim. If more than one creditor has	a particular claim, list the other creditors in I		Amount of claim	Value of collateral	Unsecured
muc	ch as possible, list the claims in alphabeti	cal order according to the creditor's name.		Do not deduct the value of collateral.	that supports this claim	portion If any
2.1	Pennsylvania Housing			#050 005 00	#020 000 00	¢00 005 00
	Finance Agency Creditor's Name	Describe the property that secures the		\$258,205.00	\$230,000.00	\$28,205.00
	Cleditor's Name	3400 Lester Road Philadelphia, 19154 Philadelphia County	, РА			
	Attn: Bankruptcy	As of the date you file, the claim is: Chec	ck all that			
	Po Box 8029 Harrisburg, PA 17105	apply.	on an inat			
		Contingent				
	Number, Street, City, State & Zip Code	☐ Unliquidated				
Wh	o owes the debt? Check one.	☐ Disputed Nature of lien. Check all that apply.				
	Debtor 1 only	☐ An agreement you made (such as mort	tgage or secu	red		
	Debtor 2 only	car loan)	0 0			
	Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechar	nic's lien)			
	At least one of the debtors and another	\square Judgment lien from a lawsuit				
	Check if this claim relates to a community debt	Other (including a right to offset)				

Last 4 digits of account number

7667

Opened 10/12 Last Active

Date debt was incurred 10/10/19

Deb	tor 1 Kimberly E Dewald		Case number (if known)	20-11200	
	First Name Middle N	lame Last Name			
2.2	Philadelphia Water Revenue Dept	Describe the property that secures the claim:	\$500.00	\$230,000.00	\$500.00
	Creditor's Name	3400 Lester Road Philadelphia, PA 19154 Philadelphia County			
	1401 JFK Blvd Philadelphia, PA 19102	As of the date you file, the claim is: Check all that apply. Contingent			
	Number, Street, City, State & Zip Code	Unliquidated			
Who	o owes the debt? Check one.	☐ Disputed Nature of lien. Check all that apply.			
_	Debtor 1 only Debtor 2 only	☐ An agreement you made (such as mortgage or s car loan)	secured		
	Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's lien)			
	at least one of the debtors and another	☐ Judgment lien from a lawsuit			
	Check if this claim relates to a community debt	☐ Other (including a right to offset)			
Date	debt was incurred	Last 4 digits of account number			
Ad	ld the dollar value of your entries in (Column A on this page. Write that number here:	\$258,705	.00	
	his is the last page of your form, add	the dollar value totals from all pages.	\$258,705		

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

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Fill in this	information to identify your	case:			
Debtor 1	Kimberly E Dewa	ld			
20010.	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filin	g) First Name	Middle Name	Last Name		
United Stat	tes Bankruptcy Court for the:	EASTERN DISTRICT	OF PENNSYLVANIA		
O	00 44000				
Case numb (if known)	per 20-11200				☐ Check if this is an
,					amended filing
					G
	Form 106E/F				
3chedu	Ile E/F: Creditors W	ho Have Unsec	cured Claims		12/15
Schedule G: Schedule D: eft. Attach tl name and ca	Executory Contracts and Unexp Creditors Who Have Claims Sec the Continuation Page to this page use number (if known).	ired Leases (Official Form ured by Property. If more ge. If you have no informa	n 106G). Do not include space is needed, copy	any creditors with partially secur	er the entries in the boxes on the
	List All of Your PRIORITY Ur				
•	creditors have priority unsecure	d claims against you?			
■ No. (Go to Part 2.				
_					
☐ Yes.					
	List All of Your NONPRIORIT	Y Unsecured Claims			
Part 2:			?		
Part 2:	creditors have nonpriority unsec	cured claims against you?		adules	
Part 2: ☐ No. `		cured claims against you?		edules.	
Part 2:	creditors have nonpriority unsec	cured claims against you?		edules.	
Part 2: 3. Do any No. Yes. 4. List all ounsecur	creditors have nonpriority unsection that provided the control of your nonpriority unsecured cled claim, list the creditor separately	cured claims against you? art. Submit this form to the aims in the alphabetical of the properties of	court with your other school court with your other school court who claim listed, identify what to	edules. • holds each claim. If a creditor have been claim it is. Do not list claims a three nonpriority unsecured claims	already included in Part 1. If more
Part 2: 3. Do any No. Yes. 4. List all unsecur than one	creditors have nonpriority unsection that provided the control of your nonpriority unsecured cled claim, list the creditor separately	cured claims against you? art. Submit this form to the aims in the alphabetical of the properties of	court with your other school court with your other school court who claim listed, identify what to	o holds each claim. If a creditor ha	already included in Part 1. If more
Part 2: 3. Do any No. Yes. 4. List all unsecur than one Part 2.	creditors have nonpriority unsection that provided the control of your nonpriority unsecured cled claim, list the creditor separately	cured claims against you? art. Submit this form to the aims in the alphabetical or y for each claim. For each claim the other creditors in Par	court with your other school court with your other school court who claim listed, identify what to	o holds each claim. If a creditor ha	already included in Part 1. If more fill out the Continuation Page of
Part 2: 3. Do any No. Yes. 4. List all ounsecur than one Part 2. 4.1 Fill No.	creditors have nonpriority unservive nothing to report in this property of your nonpriority unsecured cled claim, list the creditor separatel exception holds a particular claim, left PREMIER Bank in priority Creditor's Name	cured claims against you? art. Submit this form to the aims in the alphabetical or y for each claim. For each claim the other creditors in Par	court with your other sche order of the creditor who claim listed, identify what to rt 3.If you have more than	p holds each claim. If a creditor hat type of claim it is. Do not list claims a three nonpriority unsecured claims	already included in Part 1. If more fill out the Continuation Page of Total claim \$766.00
Part 2: 3. Do any No. Yes. 4. List all ounsecur than one Part 2. 4.1 Fin	creditors have nonpriority unsecured claim, list the creditor separatel e creditor holds a particular claim, let PREMIER Bank in priority Creditor's Name the Bankruptcy	cured claims against you? art. Submit this form to the aims in the alphabetical or y for each claim. For each or ist the other creditors in Par	order of the creditor who claim listed, identify what to rt 3.If you have more than	p holds each claim. If a creditor hat type of claim it is. Do not list claims in three nonpriority unsecured claims 2476 Opened 12/14 Last Activ	already included in Part 1. If more fill out the Continuation Page of Total claim \$766.00
Part 2: 3. Do any No. Yes. 4. List all ounsecur than one Part 2. 4.1 Fin	creditors have nonpriority unsecured claim, list the creditor separatel e creditor holds a particular claim, let PREMIER Bank in priority Creditor's Name tn: Bankruptcy Door St. 1980.	cured claims against you? art. Submit this form to the aims in the alphabetical or y for each claim. For each or ist the other creditors in Par	court with your other sche order of the creditor who claim listed, identify what to rt 3.If you have more than	p holds each claim. If a creditor hat type of claim it is. Do not list claims a three nonpriority unsecured claims	already included in Part 1. If more fill out the Continuation Page of Total claim \$766.00
Part 2: 3. Do any No. Yes. 4. List all unsecur than one Part 2. 4.1 Fin No. At Posic	creditors have nonpriority unsecured claim, list the creditor separatel e creditor holds a particular claim, let PREMIER Bank in priority Creditor's Name the Bankruptcy	cured claims against you? art. Submit this form to the aims in the alphabetical o y for each claim. For each c ist the other creditors in Par Last 4 dig	order of the creditor who claim listed, identify what to a 3. If you have more than gits of account number	p holds each claim. If a creditor has type of claim it is. Do not list claims in three nonpriority unsecured claims 2476 Opened 12/14 Last Active 6/17/15	already included in Part 1. If more fill out the Continuation Page of Total claim \$766.00
Part 2: 3. Do any No. Yes. 4. List all ounsecur than one Part 2. 4.1 Fin No. At Posio Nui	creditors have nonpriority unsecured of your nonpriority unsecured of ed claim, list the creditor separatel exceditor holds a particular claim, list PREMIER Bank priority Creditor's Name tn: Bankruptcy Box 5524 box 5524 box Falls, SD 57117	cured claims against you? art. Submit this form to the aims in the alphabetical o y for each claim. For each c ist the other creditors in Par Last 4 dig	order of the creditor who claim listed, identify what it it 3. If you have more than gits of account number is the debt incurred?	p holds each claim. If a creditor has type of claim it is. Do not list claims in three nonpriority unsecured claims 2476 Opened 12/14 Last Active 6/17/15	already included in Part 1. If more fill out the Continuation Page of Total claim \$766.00
Part 2: 3. Do any No. Yes. 4. List all unsecur than one Part 2. 4.1 Fir Nor At Posic Nur Wh	oreditors have nonpriority unsecured claim, list the creditor separatel e creditor holds a particular claim, list PREMIER Bank in priority Creditor's Name tn: Bankruptcy DBox 5524 Dux Falls, SD 57117 in the process of the control o	cured claims against you? art. Submit this form to the aims in the alphabetical o y for each claim. For each c ist the other creditors in Par Last 4 dig	order of the creditor who claim listed, identify what it at 3.lf you have more than gits of account number as the debt incurred?	p holds each claim. If a creditor hat type of claim it is. Do not list claims three nonpriority unsecured claims 2476 Opened 12/14 Last Active 6/17/15	already included in Part 1. If more fill out the Continuation Page of Total claim \$766.00
Part 2: 3. Do any No. Yes. 4. List all unsecur than one Part 2. 4.1 Fir Nor Att Posit Nur Wh	oreditors have nonpriority unset You have nothing to report in this p of your nonpriority unsecured cl ed claim, list the creditor separatel e creditor holds a particular claim, le orst PREMIER Bank npriority Creditor's Name tn: Bankruptcy b Box 5524 oux Falls, SD 57117 mber Street City State Zip Code to incurred the debt? Check one.	cured claims against you? art. Submit this form to the aims in the alphabetical or y for each claim. For each or ist the other creditors in Par Last 4 dig When was	order of the creditor who claim listed, identify what it a.lf you have more than gits of account number is the debt incurred? date you file, the claim it gent	p holds each claim. If a creditor hat type of claim it is. Do not list claims three nonpriority unsecured claims 2476 Opened 12/14 Last Active 6/17/15	already included in Part 1. If more fill out the Continuation Page of Total claim \$766.00
Part 2: 3. Do any No. Yes. 4. List all unsecur than one Part 2. 4.1 Fire North N	of your nonpriority unsecured cled claim, list the creditor separatel e creditor holds a particular claim, lost PREMIER Bank appriority Creditor's Name the Bankruptcy b Box 5524 bux Falls, SD 57117 mber Street City State Zip Code to incurred the debt? Check one.	art. Submit this form to the aims in the alphabetical or y for each claim. For each claim the other creditors in Par Last 4 dig When was As of the	order of the creditor who claim listed, identify what it it 3. If you have more than gits of account number is the debt incurred? date you file, the claim it identify that it identify the claim it identifies the claim	p holds each claim. If a creditor hat type of claim it is. Do not list claims three nonpriority unsecured claims 2476 Opened 12/14 Last Active 6/17/15	already included in Part 1. If more fill out the Continuation Page of Total claim \$766.00
Part 2: 3. Do any Yes. 4. List all ounsecur than one Part 2. 4.1 Fill Non Att Posic Nur Wh	of your nonpriority unsecured cled claim, list the creditor separatel e creditor holds a particular claim, let PREMIER Bank repriority Creditor's Name tan: Bankruptcy Box 5524 Dux Falls, SD 57117 mber Street City State Zip Code to incurred the debt? Check one. Debtor 1 only	art. Submit this form to the aims in the alphabetical or y for each claim. For each claim for each claim. Last 4 dig When was As of the Conting Unliqui Dispute	order of the creditor who claim listed, identify what in the 3. If you have more than gits of account number as the debt incurred? date you file, the claim is gent idated ed ONPRIORITY unsecured.	p holds each claim. If a creditor hat type of claim it is. Do not list claims in three nonpriority unsecured claims 2476 Opened 12/14 Last Active 6/17/15 is: Check all that apply	already included in Part 1. If more fill out the Continuation Page of Total claim \$766.00
Part 2: 3. Do any No. Yes. 4. List all unsecur than one Part 2. 4.1 Fin Non Att Posic Num Wh	of your nonpriority unsecured cled claim, list the creditor separatel exceditor holds a particular claim, last PREMIER Bank periority Creditor's Name the Bankruptcy of Box 5524 oux Falls, SD 57117 mber Street City State Zip Code to incurred the debt? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and an Check if this claim is for a comi	aims in the alphabetical or y for each claim. For each claim. For each claim. For each claim the other creditors in Parisit the other creditors in Parisit the other creditors. Last 4 dig When was	order of the creditor who claim listed, identify what i rt 3.lf you have more than gits of account number as the debt incurred? date you file, the claim is gent idated ed IONPRIORITY unsecured it loans	p holds each claim. If a creditor has type of claim it is. Do not list claims in three nonpriority unsecured claims 2476 Opened 12/14 Last Active 6/17/15 is: Check all that apply d claim:	already included in Part 1. If more fill out the Continuation Page of Total claim \$766.00
Part 2: 3. Do any No. Yes. 4. List all unsecur than one Part 2. 4.1 Fin Non Att Posic Num Wh	of your nonpriority unsecured cled claim, list the creditor separatel a creditor holds a particular claim, last PREMIER Bank periority Creditor's Name the Bankruptcy of Box 5524 oux Falls, SD 57117 mber Street City State Zip Code to incurred the debt? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and an Check if this claim is for a cominical control of the debtor and an Check if this claim is for a cominical control of the debtor in this part of the debtors and an Check if this claim is for a cominical control of the debtor in this part of the debtors and an Check if this claim is for a cominical control of the debtor in this part of the debtors and an Check if this claim is for a cominical control of the debtors in this part of the debtors and an Check if this claim is for a cominical control of the debtors and an of the deb	aims in the alphabetical or y for each claim. For each claim. For each claim. For each claim the other creditors in Parisit the other creditors in Parisit the other creditors. Last 4 dig When was	order of the creditor who claim listed, identify what i rt 3.lf you have more than gits of account number at the debt incurred? date you file, the claim is gent idated ed IONPRIORITY unsecured to loans tions arising out of a separation of the count of	p holds each claim. If a creditor hat type of claim it is. Do not list claims in three nonpriority unsecured claims 2476 Opened 12/14 Last Active 6/17/15 is: Check all that apply	already included in Part 1. If more fill out the Continuation Page of Total claim \$766.00
Part 2: 3. Do any Yes. 4. List all unsecur than one Part 2. 4.1 Fit Not Att Po Sie Nut Wh	reditors have nonpriority unsecured clean claim, list the creditor separatel creditor holds a particular claim, later the creditor separatel creditor holds a particular claim, later the creditor's Name than the creditor's	aims in the alphabetical or y for each claim. For each claim. For each claim the other creditors in Parist the other creditors in Parist 4 dig When was As of the Conting Unliquity Dispute Type of Norther Studen Cobligate report as parts.	order of the creditor who claim listed, identify what it it 3. If you have more than gits of account number as the debt incurred? date you file, the claim it ided to comprise the debt incurred idea to comprise the comprise the claim it idea to comprise the compris	b holds each claim. If a creditor has type of claim it is. Do not list claims in three nonpriority unsecured claims 2476 Opened 12/14 Last Active 6/17/15 is: Check all that apply d claim: aration agreement or divorce that you	already included in Part 1. If more fill out the Continuation Page of Total claim \$766.00
Part 2: 3. Do any Yes. 4. List all unsecur than one Part 2. 4.1 Fill Nor Nur Wh	reditors have nonpriority unsecured clean claim, list the creditor separatel creditor holds a particular claim, later the creditor separatel creditor holds a particular claim, later the creditor's Name than the creditor's	cured claims against you? art. Submit this form to the aims in the alphabetical or y for each claim. For each claim for each claim for each claim for each claim. Last 4 dig When was As of the claim for each clai	order of the creditor who claim listed, identify what it it 3. If you have more than gits of account number as the debt incurred? date you file, the claim it ided to comprise the debt incurred idea to comprise the comprise the claim it idea to comprise the compris	pholds each claim. If a creditor has type of claim it is. Do not list claims in three nonpriority unsecured claims 2476 Opened 12/14 Last Active 6/17/15 is: Check all that apply d claim: aration agreement or divorce that young plans, and other similar debts	Total claim \$766.00

Debto	1 Kimberly E Dewald	Case number (if known) 20-11200	
4.2	Kohls/Capital One Nonpriority Creditor's Name	Last 4 digits of account number	\$543.56
	PO Box 3120 Milwaukee, WI 53201	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	Ac of the date you me, the cham for check and that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Credit Card	
4.3	National Recovery Agency	Last 4 digits of account number 7415	\$228.00
	Nonpriority Creditor's Name		
	Attn: Bankruptcy	When was the debt incurred? Opened 04/19	
	Po Box 67015 Harrisburg, PA 17106		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	•	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	□Yes	Collection Attorney Radiology Affiliates Of Centra	
4.4	Portfolio Recovery Nonpriority Creditor's Name	Last 4 digits of account number 8149	\$600.00
	Attn: Bankruptcy	When was the debt incurred? Opened 08/17	
	120 Corporate Blvd	<u></u>	
	Norfold, VA 23502	_	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	_	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	□Yes	Factoring Company Account Capital One Other. Specify Bank Usa N.A.	
	- 1€3	Other. Specify Bank Usa N.A.	

Part 3: List Others to Be Notified About a Debt That You Already Listed

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

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Debtor 1 Kimberly E Dewald Case number (if known) 20-11200

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
				Total Claim
	6f.	Student loans	6f.	\$ 0.00
Total claims				
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 2,137.56
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 2,137.56

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Fill in this infor	mation to identify your	case:		
Debtor 1	Kimberly E Dewa	ld		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT O	F PENNSYLVANIA	
Case number	20-11200			
(if known)				☐ Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on *Schedule A/B:Property* (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

ı	Person or	company with Name, Number	whom you have th , Street, City, State and ZIF	e contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			
	City		State	ZIP Code	<u> </u>
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.3	<u> </u>		<u> </u>		
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.4					
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	<u> </u>
2.5			Olato	211 0000	
	Name				_
	Number	Street			
	City		State	ZIP Code	<u></u>

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		Docume	IIL Faye 14 UI	1 9	
Fill in this	s information to identify your	case:			
Debtor 1	Kimberly E Dewa	ld			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, fi	ling) First Name	Middle Name	Last Name		
United St	ates Bankruptcy Court for the:	EASTERN DISTRICT O	F PENNSYI VANIA		
Office Off	ates Barillaptey Court for the.	2,012,117,010,1111,010		_	
Case nun (if known)	nber 20-11200				☐ Check if this is an
					amended filing
Oπ: -:-	J. Farma 40011				
	al Form 106H	. 1. 1			
Sche	dule H: Your Cod	<u>ebtors</u>			12/15
ill it out, a our name	and number the entries in the e and case number (if known)	boxes on the left. Attach . Answer every question	the Additional Page to	this page. On the to	needed, copy the Additional Page, op of any Additional Pages, write
1. DO	you have any codebtors? (If	you are filing a joint case, o	do not list eitner spouse a	s a codeptor.	
□ No ■ Ye					
	thin the last 8 years, have you na, California, Idaho, Louisiana,				
	o. Go to line 3. s. Did your spouse, former spou	use, or legal equivalent live	e with you at the time?		
in lin Form	e 2 again as a codebtor only i	f that person is a guaran	tor or cosigner. Make su	ire you have listed t	ng with you. List the person shown the creditor on Schedule D (Official , Schedule E/F, or Schedule G to fill
	Column 1: Your codebtor Name, Number, Street, City, State and Zl	IP Code		Column 2: The cr Check all schedul	reditor to whom you owe the debt les that apply:
3.1	Sean Duffy			■ Schedule D,	line 2.1
	13 reynolds Road Grand Isle, VT 05458			☐ Schedule E/F	-, line
	Grand Isle, VI 03430			☐ Schedule G _	Invaire Finance Agency
				Pennsylvania i	Housing Finance Agency
3.2	Sean Duffy			■ Schedule D,	line 2.2
	13 reynolds Road Grand Isle, VT 05458			☐ Schedule E/F	
	Granu ISIE, VI UD400			☐ Schedule G	
				Philadelphia W	ater Revenue Dept

Fill	in this information to identify your c	ase:								
	otor 1 Kimberly E									
	otor 2				_					
Uni	ted States Bankruptcy Court for the	: EASTERN DISTRICT	OF PENNSYLVANI	A	_					
	se number 20-11200		-				mended oplemer	nt showing	g postpetition	
O	fficial Form 106I						DD/ YY		-	
S	chedule I: Your Inc	ome								12/15
sup _i spo atta	es complete and accurate as possiblying correct information. If you use. If you are separated and you ch a separate sheet to this form. Describe Employment	are married and not fili	ng jointly, and your ith you, do not inclu	spouse i ude inforr	s livi natio	ing with you on about you	ı, includ ur spot	de inforn ise. If mo	nation about ore space is	your needed,
1.	Fill in your employment information.		Debtor 1			De	Debtor 2 or non-filing spouse			
	If you have more than one job,	Employment status	■ Employed				☐ Employed			
	attach a separate page with information about additional	Employment status	☐ Not employed				☐ Not employed			
	employers.	Occupation Bartender- cash tips only			ıly					
	Include part-time, seasonal, or self-employed work.	Employer's name	Tattletales							
	Occupation may include student or homemaker, if it applies.	Employer's address	6900 New Falls Levittown, PA	-						
		How long employed t	here? 20							
Par	t 2: Give Details About Mor	nthly Income								
	mate monthly income as of the duse unless you are separated.	ate you file this form. If	you have nothing to	report for a	any I	ine, write \$0	in the s	pace. Inc	clude your no	n-filing
	u or your non-filing spouse have mo e space, attach a separate sheet to		ombine the information	on for all e	mplo	yers for that	person	on the lii	nes below. If	you need
						For Debtor	1		btor 2 or ng spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$	3,459	9.40	\$	N/A	
3.	Estimate and list monthly overt	ime pay.		3.	+\$	(0.00	+\$	N/A	
4.	Calculate gross Income. Add lin	ne 2 + line 3.		4.	\$	3,459.4	10_	\$	N/A	

Official Form 106l Schedule I: Your Income page 1

Deb	otor 1	Kimberly E Dewald	-	С	ase n	iumber (if kno	vn)	20-11	200		
						Debtor 1		non-	Debtor filing s	pouse	
	Cop	by line 4 here	4.		\$	3,459.	40	\$		N/A	<u>.</u>
5.	List	t all payroll deductions:									
	5a.	Tax, Medicare, and Social Security deductions	5a	ι.	\$	0.0	00	\$		N/A	<u>. </u>
	5b.	Mandatory contributions for retirement plans	5b		\$	0.0	00	\$		N/A	_
	5c.	Voluntary contributions for retirement plans	5с		\$		00	\$		N/A	_
	5d.	Required repayments of retirement fund loans	5d		\$		00	\$		N/A	_
	5e. 5f.	Insurance	5e 5f.		\$ \$		00	\$ \$		N/A	_
	5g.	Domestic support obligations Union dues	51. 5g		φ \$	0.0	00	\$ 		N/A N/A	_
	5h.	Other deductions. Specify:	5h	•	\$ 			+ \$		N/A	_
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	— 6.	;	· —— B	0.0		\$		N/A	_
7.		culate total monthly take-home pay. Subtract line 6 from line 4.	7.	;	· — B	3,459.		\$		N/A	_
8.		t all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total				3, 1361					_
		monthly net income.	8a		\$	0.0	00	\$		N/A	<u>. </u>
	8b.	Interest and dividends	8b).	\$	0.0	00	\$		N/A	<u>. </u>
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c	:	\$	450.	00	\$		N/A	
	8d.	Unemployment compensation	8d	١.	\$	0.0	00	\$		N/A	_
	8e.	Social Security	8e) .	\$	0.0	00	\$		N/A	<u>. </u>
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.		\$	0.0		\$		N/A	
	8g.	Pension or retirement income	8g	'	\$	0.0		\$		N/A	_
	8h.	Other monthly income. Specify: Average Tax Refund	_ 8h	1.+	\$	260.	00	+ \$		N/A	<u></u>
9.	Add	d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$		710.	00	\$		N/A	A
10.	Cal	culate monthly income. Add line 7 + line 9.	10.	\$	Δ	,169.40 +	\$		N/A	= \$	4,169.40
		I the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.		*-					11/7	* -	4,105.40
11.	Sta Incl othe Do	te all other regular contributions to the expenses that you list in <i>Schedule</i> ude contributions from an unmarried partner, members of your household, your er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not excify:	depe						chedule 11.		0.00
12.		If the amount in the last column of line 10 to the amount in line 11. The rester that amount on the Summary of Schedules and Statistical Summary of Certailies							12.	\$	4,169.40
13.	Do	you expect an increase or decrease within the year after you file this form	?						'	Combi month	ned ly income
		No.									

Official Form 106l Schedule I: Your Income page 2

E:II	in thin i nforma	tion to identife	011K 0000	·							
		tion to identify y									
Deb	tor 1	Kimberly E I	Dewald			Ch	eck if this is: An amended filing	n			
	otor 2						A supplement sho	owing postpetition chapter			
(Spo	ouse, if filing)						13 expenses as o	of the following date:			
Unit	ed States Bankr	uptcy Court for the	: EASTE	SYLVANIA	MM / DD / YYYY						
	e number 20 nown)	-11200									
Of	fficial Fo	rm 106J									
So	chedule	J: Your	Exper	ises				12/15			
Be info	as complete a	and accurate as	s possible eded, atta	. If two married people a ch another sheet to this							
Par		ibe Your House	ehold								
1.	Is this a join										
	■ No. Go to		in a senar	ate household?							
	No No.		и сори.								
	□ Ye	es. Debtor 2 mu	st file Offic	al Form 106J-2, Expense	s for Separate House	ehold of De	ebtor 2.				
2.	Do you have	e dependents?	□ No								
	Do not list Do Debtor 2.	ebtor 1 and	■ Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?			
	Do not state				_			□ No			
	dependents	names.			Daughter		13	_ Yes □ No			
								□ Yes			
								□ No			
								_			
								□ No □ Yes			
3.		enses include	. •	No							
		f people other t d your depende		Yes							
Par		ate Your Ongoi		ly Fynansas							
Est exp	imate your ex	penses as of y	our bankr	uptcy filing date unless				napter 13 case to report of the form and fill in the			
the	value of such	n assistance an		government assistance cluded it on <i>Schedule I:</i>			Your ex	nenses			
(On	ficial Form 10	oi.)					Tour ex	penaea			
4.		r home owners ad any rent for th		ses for your residence. or lot.	Include first mortgag	e 4.	\$	1,510.00			
	If not includ	ed in line 4:									
	4a. Real e	state taxes				4a.	\$	0.00			
	•	rty, homeowner'				4b.	·	0.00			
		maintenance, re owner's associa	-	upkeep expenses dominium dues		4c. 4d.	·	190.00 0.00			
5.				our residence, such as ho	ome equity loans	5.	· ·	0.00			

btor 1 Kimberly E Dewald	Case number (if known)	20-11200
Utilities:		
6a. Electricity, heat, natural gas	6a. \$	175.00
6b. Water, sewer, garbage collection	6b. \$	50.00
6c. Telephone, cell phone, Internet, satellite, and cable services	6c. \$	390.00
6d. Other. Specify:	6d. \$	0.00
Food and housekeeping supplies	7. \$	500.00
Childcare and children's education costs	8. \$	60.00
Clothing, laundry, and dry cleaning	9. \$	150.00
Personal care products and services	10. \$	75.00
Medical and dental expenses	11. \$	25.00
Transportation. Include gas, maintenance, bus or train fare.		400.00
Do not include car payments.	12. \$	400.00
Entertainment, clubs, recreation, newspapers, magazines, and books	13. \$	40.00
Charitable contributions and religious donations	14. \$	0.00
Insurance.		
Do not include insurance deducted from your pay or included in lines 4 or 20.	150 ¢	0.00
15a. Life insurance	15a. \$	0.00
15b. Health insurance	15b. \$	0.00
15c. Vehicle insurance	15c. \$	0.00
15d. Other insurance. Specify:	15d. \$	0.00
 Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 	16. \$	0.00
Installment or lease payments:		0.00
17a. Car payments for Vehicle 1	17a. \$	0.00
17b. Car payments for Vehicle 2	17b. \$	0.00
17c. Other. Specify:	17c. \$	0.00
17d. Other. Specify:	17d. \$	0.00
Your payments of alimony, maintenance, and support that you did not report		0.00
deducted from your pay on line 5, Schedule I, Your Income (Official Form 10). Other payments you make to support others who do not live with you.	\$	0.00
Specify:	Ψ 19.	0.00
Other real property expenses not included in lines 4 or 5 of this form or on S	Schedule I: Your Income.	
20a. Mortgages on other property	20a. \$	0.00
20b. Real estate taxes	20b. \$	0.00
20c. Property, homeowner's, or renter's insurance	20c. \$	0.00
20d. Maintenance, repair, and upkeep expenses	20d. \$	0.00
20e. Homeowner's association or condominium dues	20e. \$	0.00
Other: Specify:	21. +\$	0.00
Calculate your monthly expenses		
22a. Add lines 4 through 21.	\$	3,565.00
22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J	J-2 \$	<u> </u>
22c. Add line 22a and 22b. The result is your monthly expenses.	\$	3,565.00
Calculate your monthly net income.		
23a. Copy line 12 (your combined monthly income) from Schedule I.	23a. \$	4,169.40
23b. Copy your monthly expenses from line 22c above.	23b\$	3,565.00
23c. Subtract your monthly expenses from your monthly income.		
The result is your monthly net income.	23c. \$	604.40
Do you expect an increase or decrease in your expenses within the year after For example, do you expect to finish paying for your car loan within the year or do you expect modification to the terms of your mortgage?		ease or decrease because (
■ No. □ Yes. Explain here: I drive a 2011 Kia automobile that is in my		

Fill in this inforr	nation to identify your	case:							
Debtor 1	Kimberly E Dewa								
	First Name	Middle Name	Last Name						
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name						
United States Ba	nkruptcy Court for the:	EASTERN DISTRICT (OF PENNSYLVANIA						
Case number	20-11200								
(if known)					_	k if this is an nded filing			
					amon	acca ming			
Off: a: a!	- 100D								
Official Forn									
Declarat	ion About a	in Individual	Debtor's Sch	<u>redules</u>		12/15			
You must file this obtaining money	s form whenever you fi	le bankruptcy schedule n connection with a ban	onsible for supplying corre s or amended schedules. I kruptcy case can result in	Making a false stater					
Sigr	n Below								
Did you pa	Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?								
■ No									
☐ Yes. N	Yes. Name of person Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)								
Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.									

Signature of Debtor 2

Date

X /s/ Kimberly E Dewald
Kimberly E Dewald
Signature of Debtor 1

Date March 12, 2020